RECEIVED

8-21-92

1									RECEIVED			
	W/U\$T-2)	Site In	vestigation Report	t For Pe	ermane	nt Clo	sure o	r Chan	ge-in-Savice of U.S.I.			
TA	IN (S	Return Completed Fo The appropriate DEM (SEE MAP ON REVER OFFICE ADDRESS).	ng to the co S COPY (PI	ounty of the	ne facility	/e boation	State	Number Received Winston-Salem				
					UCTIONS		ريسنا					
		L Ownership of Tar	Complete and return within	n (30) days	following a	completion		_				
		···						Location	of Tank(s)			
	Hwy 52 t Address P.O. D	Creek Apparel oration, Individual, Public Agency, 2 South & Holl's Drawer 1107		Faci	Facility Name or Company Cross Creek Apparel Inc. Dstribution Center Facility ID # (if available)							
City	Surry				- Oue-	Hwy 5	s or State 2 South	h & Hol	lly Springs Road			
<i>!</i>	Mt. Airy	y NC	27030		Cou	County City Zip Code 27030						
Area (Jode 9	919 Telephone Nu	umber 789-6161		Area	a Code	919		phone Number /89-6161			
				II. Conta	act Perso	J.						
		Bill Inman Name		vision	Engine	er			919-786-0806			
Closur	re Contractor	r <u>Heath Brothe</u> (Name)	ers Grading Wa	Job Title alnut Co					ephone No. (Area Code) 019-593-8384			
.ab	·	Engineering 1 (Name)	Tectonics P.A.	(Address) 1729 Va (Address)	rgrave	St. V	<i>l</i> instor	n-Salem	phone 180 724-6994			
		N. U.S.T. Information	 '	<u> </u>	Excervation	en Con	elition.	1 tro ₁	ephone No. (Area Code)			
Tank	Size in	Tank	Last	Water In	in j	Free	Notable	e Cocor or	VL Additional Information Required			
No.	Gaillons	Dimensions	Contents	Yes N	No Yes	Product S No		Contamination No				
1	10,000	26'7" x 8'	#2 Fuel 0il		х	х	×		See reverse side of pink copy (owner's copy) for additional information required by N.C DEM in the written report and sketch.			
				VII. Che	ck List							
			Chec	k the activi	~= ⁄ities ∞m/	deted.						
	Notify DEM Drain & flust Remove all Excavate do Clean and in Remove drop submersible Cap or plug	cal fire marshall A Regional Office before sh piping into tank. I product and residuals fi lown to tank. Inspect tank. Inspect tank. Inspect tank gauge pumps and other tank gall lines except the veni	connections,		ABANDONMENT IN PLACE Fill tank until material overflows tank opening; Plug or cap all openings;. Disconnect and cap or remove vent line Solid inert material used - specify: REMOVAL Create vent hole Label tank Dispose of tank in approved manner Final tank destination: Safeway Tank & Disposal Colfax, North Carolina							
	Purge tank of Cut one or n Backfill the a Date Tank(s Date of Ch	of all product & flammal more large holes in the										
cume bmitte	y under pen ents, and th ted informati	enalty of law that I h that based on my in ation is true, accura	have personally examininguity of those individu	ned and ar luals immed	m familiar diately re	r with the esponsible	مساملات مط	ation subrataining the	omitted in this and all attached ne information, I believe that the			
	TO GIVE CHARLE	■ ande of dwiter of dwite	er's authorized representative	e	Signa	ature			D-1- Ci			

Kennetto B. Varhoy

Kenneth B. Vanhoy
GW/UST-2 Rev.7/29/91 Wire Coox.

ήŒW	//UST-2)	Site Inv	restigation Report	For	Perm	anent	Clos	ure or	Chang	ge-in-Service of U.S.T.			
TA	NKS TH IN [S			(PINK)	,				State Use Only I.D. Number Date Received				
INSTRUCTIONS													
Complete and return within (30) days following completion of site investigation. I. Ownership of Tank(s) II. Location of Tank(s)													
		. Ownesip of fail	k(S) 					U.		Or Tands)			
1	Cross Creek Apparel Inc. Owner Name (Composition, Individual Public Agency, or Other Entry) Hwy 52 South & Holly Springs Road Street Address P.O. Drawer 1107						Facility Name or Company Cross Creek Apparel Inc. Facility ID # (if available)						
C	P.O. D	<u>rawer 1107</u>			- -	-	•	,					
County	Surry		Street Address or State Road Hwy 52 South & Holly Springs Road										
City								County City Zip Code Surry Mt. Airy 27030					
Area C		19 Telephone Nur			- -	Area (919	Tele	phone Number 789-6161			
				III. Co	maci (Person							
		Bill Inman	Dia	risin	n Enc	jinee	-		Q	19-786-0806			
		Name		ob Trobe	.,	,				ephone No. (Area Code) 019-593-8384			
Closure		Heath Brothe								1_1			
Lab	(Name) Engineering 1	Tectonics P.A.	ddress 729	Varqı	ave S	št. W	inston	-Salem	ephone 1 90- 7274-69994			
	(Name)		\ddress)						ephone No. (Area Code)			
		V. U.S.T. Informatic	n .			cavalior	Cond			VL Additional Information Required			
Tank	Size in	Tank	Last		vation		ee duct	Notable Visible Soil	Odor or Contaminación				
No.	Gallons	Dimensions	Contents	Yes	No	Yes	No	Yes	No	See reverse side of pink copy (owner's copy) for additional			
1	10,000	26 '7" x 81	#2 Fuel 0il		x		×	×		information required by			
	···· · · · · · · · · · · · · · · · · ·					<u> </u>				N.C DEM in the			
 										written report and sketch.			
						<u> </u>							
\vdash						<u> </u>				i			
						-				ĺ			
		<u> </u>	·	VII.	Check	List							
		al fire marshall Regional Office before		the a	activities	comple		ANDONME!	MT 161 FW	405			
	Drain & flus	sh piping into tank.				I⊑		tank until	material ov	verflows tank opening;			
		product and residuals own to tank	from tank			-	Plug or cap all openings;. Disconnect and cap or remove vent line						
	Clean and									- specify:			
	submersible	pumos and other tan	pipe, vapor recovery tank k fixtures.	connection	ons,								
	Cap or plug	all lines except the ver of all product & flamma	nt and fill lines.				٦,		OVAL				
	Cut one or	more large holes in the	tanks.		Create vent hole Label tank								
Backfill the area. Date Tank(s) Permanently closed: July 1, 1992							Dispose of tank in approved manner Final tank destination: Safeway Tank & Disposal						
Date of Change in Service: Colfax, North Carolina										1			
								•					
		0. 3. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.											
oocum	enis, and	enalty of law that I that based on my ation is true, accura	inquiry of those individu	ed and uals im	d am i nmedia	amiliar tely res	with the ponsibility	ne inform le for ob	ation sul taining t	bmitted in this and all attached he information, I believe that the			
			ner's authorized representative			Signat	LIKO						
				د سم		•			ء ہر	Date Signed			
	Kennet	h B. Vanho	e Copy - Regional Office			Ken	meth	T€. V	anho	w B-2(-92			
GW/US	T-2 Rev.	7/29/91 Whit	e Copy - Regional Office		Yellow	Copy - (Pink	Copy - Owner			